Sask - Dept Repts.
c 2

Government of Saskatchewan

Annual Report 1981-82

Saskatchewan Alcoholism Commission

SASK. LEGISLATIVE LIBRARY
MAR 2 1983
REGINA

The Saskatchewan Alcoholism Commission

Contents

Highlights for 1981-82 1
Letters of Transmittal 2
Chairman's Statement 3
Members of the Board 4
History 5
Legislative Authority 5
Board of Directors 5
Objectives of the Alcoholism Commission 5
Organization 5
Staff Distribution 5
Organization Chart 6
Administration Division 7
Community Services Division 8
Education Division 9
Rehabilitation Division 10
Research Division 11
Statistics 12
  Rehabilitation Caseload 12
  Expenditure Chart 13
Financial Statements 15

Highlights for 1981-82

- In August 1981, Dr. Saul Cohen was appointed Chairman of the Commission, replacing Dr. F. J. Gathercole who held office since 1976.

- The Board completed its organizational study of the Commission and approved a reorganization of the Commission.

- During the year, the Board was active in developing and presenting a submission to Cabinet regarding alcohol and other drug issues in the province.

- The Board hosted a very successful, first Interagency Meeting in Saskatoon at which all funded agencies of the Commission were represented. The Board also initiated the practice of holding some of its meetings in the Regions.

- Discussions were begun during the year with delegates of Alcoholics Anonymous with a view to identifying the Commission's interest in maintaining relationships and liaison while respecting the traditions of the fellowship.

- Funding was provided by the Commission for two new out-patient facilities; one in North Battleford, operated by the Battlefords Alcohol and Drug Abuse Council and the other in Melfort, operated by the North East Council on Alcohol and Drug Abuse. In addition, provision was made to transfer Larson House, Crysler Residence and Gusway-Gerry Residence from per diem to grant funding.

- There was a continuing high demand for patient services throughout the province and for public education services by means of pamphlets, displays and local community seminars.

- During the year, two major reports were released: one was the Task Force Report on Employee Assistance programs and the other was the CNS Prescription Drugs and the Elderly Report.

SASK. LEGISLATIVE LIBRARY
MAR 2 1983
REGINA

Saskatchewan

Minister of Health

Legislative Building
Regina, Canada
S4S 0B3

June 30, 1982

To the Honourable Irwin McIntosh,
Lieutenant Governor of Saskatchewan.

May It Please Your Honour:

Pursuant to Section 11(2) of The Alcoholism Commission of Saskatchewan Act, I respectfully submit, for your consideration, the Annual Report of The Saskatchewan Alcoholism Commission for the fiscal year ending March 31, 1982.

Respectfully submitted,

Graham Taylor

D. Graham Taylor,
Minister of Health.

Saskatchewan

Saskatchewan Alcoholism Commission

3475 Albert Street
Regina, Canada
S4X 6X6

June 30, 1982.

To the Honourable D. Graham Taylor,
Minister of Health.

Dear Mr. Taylor:

It is my honour to present, on behalf of The Saskatchewan Alcoholism Commission, the Annual Report and audited financial statements for the fiscal year ending March 31, 1982.

Respectfully submitted,

Saul Cohen

Saul Cohen
Chairman.

Chairman's Statement

It has become abundantly clear to the Board of the Alcoholism Commission that alcohol and other drug consumption patterns have shown a progressive increase since the 1960's. In fact, the annual gallonage consumption of alcohol per adult aged 15 years or over in this province has risen from 1.4 gallons of absolute alcohol in 1961 to 2.3 gallons in 1981 and there is every indication it will continue to rise over the next decade. Increasing consumption rates of alcohol and other drugs are paralleled by increasing levels of alcohol and other drug abuse with major health, social and economic consequences.

The Board has known for some time that the task of slowing down or reversing the trend of increased consumption of alcohol and other drugs is beyond the capacity of any single agency or the resources available to government alone. The challenge accepted by the Board, therefore, was to develop a multi-strategy approach which addressed a number of factors contributing to rising consumption of alcohol and other drugs. In an attempt to deal with this complex problem, the Board has directed its strategy in the 1980's towards the incorporation of preventive, interventive and rehabilitative measures on a regional as well as a provincial basis. A needs analysis was completed on all ten health regions and a five-year plan for prevention and treatment was developed. Grants and payments to community-based agencies have proportionately increased from 26 per cent ($803,197) of the Commission's budget in 1978-79 to 46 per cent ($2,482,784) in 1981-82.

Since 1978, the Impaired Driver Treatment Program was initiated together with five rural out-patient and community education centres. Six in-patient facilities were transferred from per diem to grant support by the Commission during that time. There are now a total of 266 beds in rehabilitation facilities funded through the Commission including 81 beds in detoxication programs and 185 beds in other residential programs. These in-patient facilities coupled with two day-patient and nine out-patient centres provided more than 7,600 admissions in 1981-82.

In the area of provincial services, an increasing commitment has been made to develop prevention and education programs. Among these programs are the establishment of programs for children of alcoholics and other youth programs including peer counselling, intervention skills for parents and Safe Graduation. Research projects included a public drunkenness survey, impaired driving profile, central nervous system drug study of the elderly and a task force report on employee assistance programs which now cover approximately 30 per cent of the industrial work-force in Saskatchewan.

A major highlight of the last year was the first Interagency Meeting which was held in Saskatoon. This meeting afforded Board members the opportunity to meet with representatives of the 19 funded agencies. It also provided ample opportunity for discussion and communication of the various problems that are being faced by these agencies in the field.

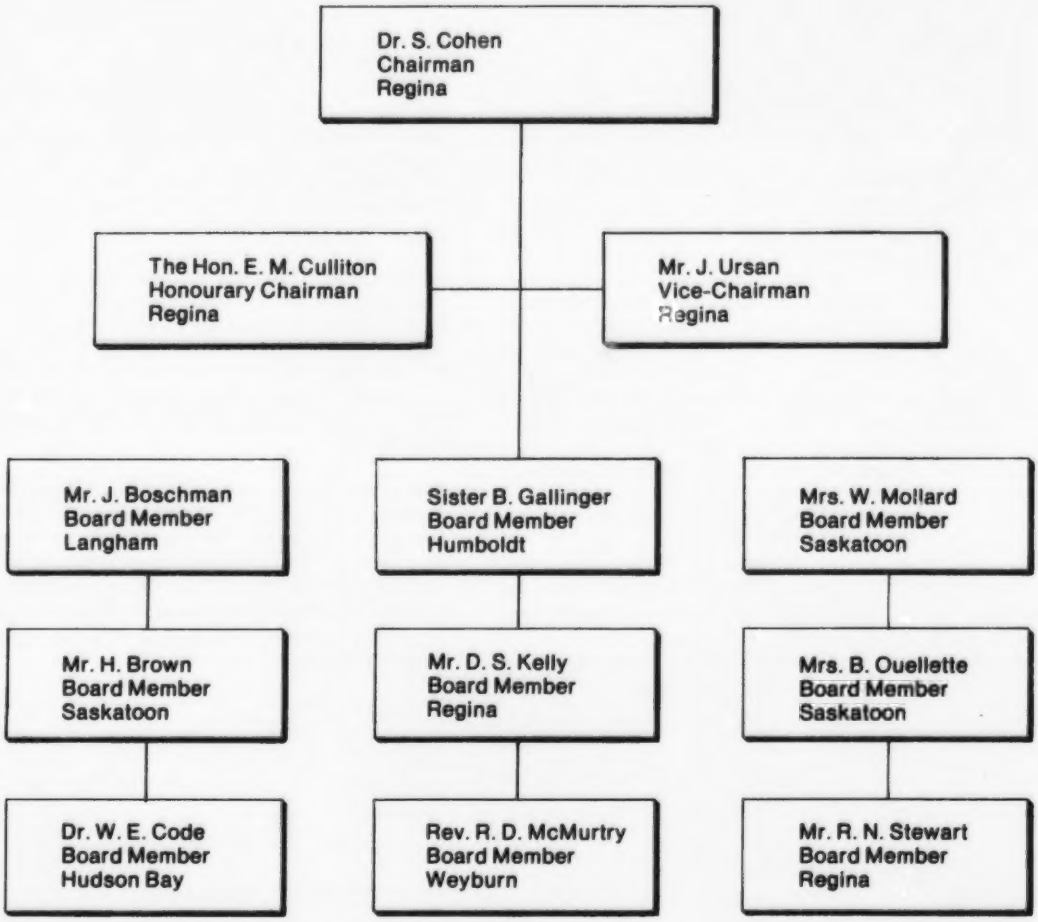
Since that time, the Board has reached out into various health regions to conduct Board meetings and this practice has allowed Board members to further their awareness of the problems faced in the various communities. It is in this spirit of reaching out that the Board hopes to continue its work in meeting the challenge of alcohol and other drug abuse in Saskatchewan.

Saul Cohen
Chairman.

The Saskatchewan Alcoholism Commission

Members of the Board

As at March 31st, 1982



History

In July 1967, the Culliton Report (Report of the Special Committee on Alcoholism to the Minister of Public Health) recommended the establishment of a Commission on Alcoholism. As a result, The Alcoholism Commission of Saskatchewan Act, 1968, was passed.

Legislative Authority

The Saskatchewan Alcoholism Commission operates under the authority of The Alcoholism Commission of Saskatchewan Act. The Act provides for at least eight and not more than twelve Commission members appointed by the Lieutenant Governor in Council. The Chairman and three members of the Board hold office at the pleasure of the Lieutenant Governor in Council. The remaining members are appointed for three-year terms and may not hold office for more than two consecutive terms. All members must be residents of Saskatchewan.

Board of Directors

The Board of Directors held ten (10) meetings during the 1981-82 fiscal year. There were two (2) changes in Board membership during the year, one of which was the appointment (in August) of Dr. Saul Cohen as Chairman of the Board.

Objectives of the Saskatchewan Alcoholism Commission

- To promote greater community awareness of the dimensions of addiction-related problems with a view to community action.
- To foster and maintain healthy attitudes and behaviour patterns of the general population so as to reduce the risk of problems with alcohol and other drug abuse.
- To provide early intervention to identify and rectify irresponsible use and abuse of alcohol and other drugs by the population at risk so as to reduce the social and emotional costs of current behaviour and promote healthier life styles.
- To assist alcoholic and other chemically - dependent persons, their families and associates to cease current problematic behaviour and to avoid recurrence of such behaviour.

Organization

The Commission is made up of five divisions:

The Administration Division administers, directs and controls Commission activities, including implementation of Board policies.

The Community Services Division helps communities develop their own resources to combat alcohol and other drug abuse. Short-term counselling and post-rehabilitation follow-up are also provided by division staff.

The Education Division carries out preventive education programs, providing resources both to Commission divisions and to the general public. Its work includes the production and distribution of audio-visual and print material as well as the provision of staff to organize and speak at a wide range of educational functions.

The Rehabilitation Division is responsible for the treatment and rehabilitation of people dependent on alcohol and other drugs. It also seeks to assist the families of such persons.

The Research Division conducts evaluative research of Commission programs, establishes criteria for determining the need for programs and conducts studies on alcohol and other drugs to assist in program development.

As the result of a decision to reorganize, which was approved on September 1, 1981, major changes have been proposed for the organizational structure of the Commission. Under the reorganization, which will be implemented on April 1, 1982, the Commission is to be divided into two main components: Regional Services Division and Provincial Services Division. The Regional Services Division, which is to consist of the Northern District and Southern District, will assume responsibility for the services provided by the Community Services and Rehabilitaton Divisions under the former organizational structure. The Provincial Services Division is to consist of the Administration Unit, Evaluation and Research Unit, Human Resource Development Unit and Prevention Unit (formerly the Education Division).

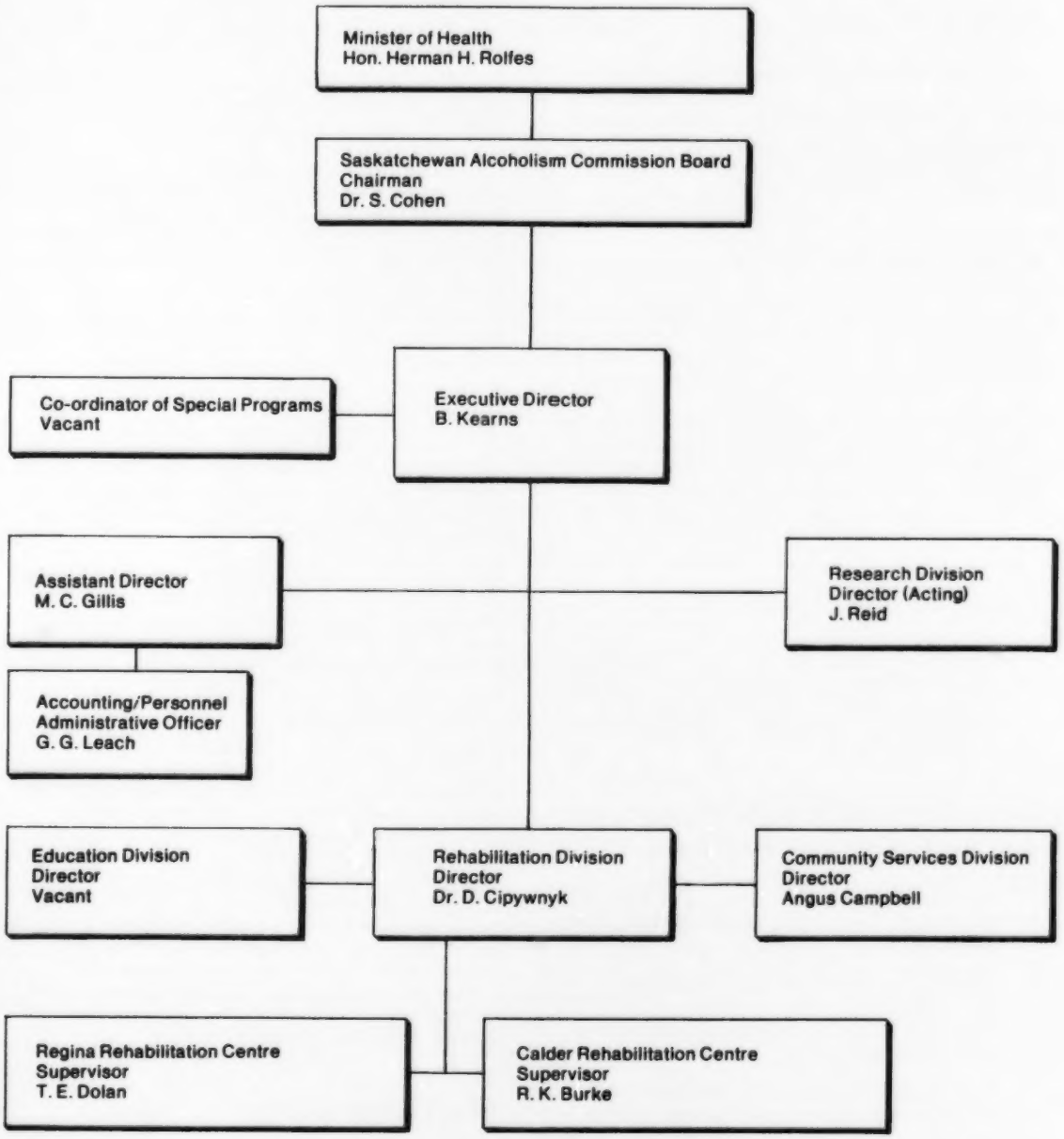
Staff Distribution

As of March 31, 1982

Administration Division	12
Community Services Division	17
Education Division	10
Rehabilitation Division	36
Research Division	4
	79

Organization Chart

As at March 31st, 1982



Administration Division

The division is responsible for the administrative direction and control of Commission activities including the implementation of Board policies and the funding of allied agencies. It provides centralized services for accounting and personnel needs within the Commission as well as maintaining budgetary and inventory control of Commission resources and executive support and administration of Board responsibilties.

Revenues and Expenditures

The legislative appropriation for 1981-82 was $5,107,820.

During the 1981-82 fiscal year, $824,584 was received from the federal government Vocational Rehabilitation of Disabled Persons (V.R.D.P.) Program as its contribution to expenditures on Commission rehabilitation programs. Part of this funding helped clients improve their education to increase employment opportunities.

Donations of $4,146 were received and subsequently deposited in the contingency fund. The total equity of this fund as of March 31, 1982 was $75,857.

The following table shows the expenditure breakdown for the period April 1, 1981 to March 31, 1982 by division:

Administration	$ 458,568
Community Services	599,915
Education	245,485
Rehabilitation (includes contracts)	1,641,655
Research	144,098
Grants	2,348,390
	$ 5,438,111

Complete financial statements are on pages 15 to 20.

Funding of Other Organizations

In 1981-82, the Commission provided grants and contracts for services by allied agencies, totalling $2,482,785, to the following:

Detoxication Facilities

- Larson House, Saskatoon
- Gusway-Gerry Residence, Regina
- Angus Campbell Centre, Moose Jaw
- Walter A. "Slim" Thorpe Recovery Centre, Lloydminster

Rehabilitation Facilities

- Impaired Driver Treatment Program, St. Louis Alccholism Rehabilitation Centre, St. Louis
- Native Alcohol Rehabilitation Centres, Regina, Prince Albert and Saskatoon

Community Education and Out-patient Facilities

- Native Alcohol Out-patient and Crisis Centres, Prince Albert and Regina
- Yorkton Alcoholisr Society
- Danny Fisher Centre, Kindersley
- Prince Albert Council on Alcohol and Drug Abuse
- Battlefords Out-patient Centre
- Melfort Out-patient Centre

Halfway House

- Crysler Residence, Saskatoon

Others

- Federation of Saskatchewan Indians (Education)
- Native Alcohol Council (Core Services)

The Commission also contracted to pay operating costs for Myers House in Regina, a residence providing 24-hour supervision of clients attending the Regina Rehabilitation Centre.

Funded Resources

Treatment and Holding Facilities — Patients are not admitted to the treatment and rehabilitation program until they are withdrawn from alcohol and other drugs. In order to facilitate withdrawal under supervised conditions, the Commission contracted with Gusway-Gerry Residence in Regina and Larson House in Saskatoon, both privately operated, Walter A. "Slim" Thorpe Recovery Centre in Lloydminster, operated by Walter A. "Slim" Thorpe Recovery Centre Society, and Angus Campbell Centre in Moose Jaw, operated by the Moose Jaw and District Alcoholism Society, to provide detoxication services.

These facilities are used as detoxication, assessment and referral centres. Patients are referred either to the Commission for treatment or to other resources such as Alcoholics Anonymous and others for ongoing and follow-up support. General hospitals have increasingly been admitting persons in acute states of dependency and facilitating detoxication prior to referral to the Commission for treatment.

When discharged from treatment, patients are referred to the Commission's regional co-ordinators and other resources in their communities for ongoing help.

Societies — The Commission works closely with non-profit community societies and private agencies which provide other services to alcholics in a number of Saskatchewan communities.

Other Resources — The Commission utilizes other resources available within the province, including Family Service Bureau, Vocational Rehabilitation of Disabled Persons (V.R.D.P.), Native Alcohol Council (N.A.C.) and self-help groups such as Alcoholics Anonymous, Al-Anon and Alateen, to assist alcoholics and other drug dependent persons and their collaterals.

Community Services Division

The goal of the Community Services Division is to mobilize and activate the communities of Saskatchewan into action on alcohol and other drug abuse problems. Through co-ordinators in ten regions of Saskatchewan, the division works with communities in developing and utilizing a co-ordinated team-work approach to enable them to deal with the problems related to all forms of drug abuse. The Community Services Division extends the resources of the Commission at the regional level by promoting and involving the community in comprehensive action relative to the extensive problems associated with chemical use, abuse and dependency.

Of special note are the following activities during 1981-82:

Community Development

There continued to be a steady increase in the public's awareness of alcohol and other drug problems with the most noted trends for 1981-82 in the area of programs for youth.

Regional staff worked extensively with community educational committees, school boards, superintendents and teachers, students and parents. Their work included assisting in the co-ordination of educational programs, acting as a resource to programs and providing resource materials such as displays, posters, pamphlets, films, etc.

Specific programs included the book display for schools, involvement in Safe Graduation programs, A.S.K. (Addicitions: Services and Knowledge) peer counselling program for high school students, "Another Chance" (a program for parents with drug and alcohol-abusing youth) and an increase in teachers' attendance at the Mini Course.

Community Education Programs

The Mini Course — A four and one-half day information and problem-solving program on alcohol and other drug abuse — continued to be in demand by community participants from across the Province. To manage the increased requests for the Mini Course, similar three-day regional programs were held in the North Battleford, Melfort, Prince Albert and Moose Jaw regions.

Business and industry showed an increased interest in obtaining specific information regarding identification of the problems of alcohol and other drugs in the workplace as witnessed by ten referrals to the Mini Course.

The A.S.K. Program was provided to four high schools in July 1981 and five high schools allowed their students to attend a one-week semester A.S.K. Program, with a total of 48 students completing the 1981-82 program.

The Impaired Driver Treatment Program (I.D.T.P.) functioned very well in 1981-82 with successful follow-up being provided to 397 clients as well as family members through individual, family and group counselling. The three participating agencies, The Saskatchewan Alcoholism Commission, the St. Louis Treatment Centre and the Department of Social Services (Probation Services), worked co-operatively to review and refine the program.

Trends

Communities are taking more direct responsibility for client assessment and educational thrusts, however, this trend has increased the demand for community-based resources for client intervention, treatment and follow-up and educational resources to agencies, industry, schools and community groups.

Consultative services were provided by the division and, in keeping with the Commission's long-term plan to focus on community development, the Regional Co-ordinators utilized out-patient services provided through allied agencies in Prince Albert, Kindersley, Yorkton and North Battleford. They also worked in co-operation with other community resouces such as Alcoholics Anonymous, Al-Anon and private consulting firms.

Increased community awareness of the problems caused by alcohol and other drugs continues to place an emphasis on the role of the Regional Co-ordinator as one of primary consultant.

Community Services Division Statistics, 1980-81 and 1981-82

	1980-81	1981-82
Community contacts	8,644	6,265
Out-patient counselling	6,507	5,430
Education programs:		
(a) General Education Programs	1,934	1,982
Estimated audience	18,500	18,923
(b) Education Programs for Employers	23	16
Estimated audience	168	154
Community education programs:		
(a) Mini Course Number of courses presented	26	15
Number of participants	339	198
(b) Alcoholism: Services & Knowledge (A.S.K.) Summer Program Number of sessions presented (3 weeks)	1	1
(1 week)	—	3
Number of participants	13	48
(c) "Another Chance" parent group Number of sessions presented (1 evening x 6 weeks)	—	1
Number of participants	—	12
Impaired Driver Training Program:		
Community contacts	273	249
Counselling	3,861	3,512
Total number of I.D.T.P. clients	469	397

Education Division

The Education Division is a centrally-located support group supplying materials and resource personnel to other staff members and the public. Support programs carried out by the division concentrate on providing information through various means such as lending films, producing and providing print material, providing speakers and training others to provide training.

Information Programs:

The distribution of information is achieved through a number of strategies one of which is to provide access to information materials such as pamphlets, brochures and other publications. During 1981-82, a number of new pamphlets, directories and resource manuals were prepared and disseminated. The great increase in pamphlet distribution during the year can be attributed to increased public demand for information regarding alcohol and other drugs and the risks associated with their use and abuse.

Film Library and Displays:

The film lending service, which provides films and other audio-visual productions to individuals and organizations on request, continues to link the Commission with the public. During 1981-82, a variety of displays were prepared for use throughout the province in schools, exhibitions and shopping malls and at conventions for health care professionals, teachers, women and youth.

Education Seminars:

The division provides a range of seminars to a variety of groups including nurses, teachers, counsellors, employee/employer representatives and community groups, preparing them to work in prevention and treatment of alcohol and other drug abuse in their own work situations. The seminars, "Dependencies" and "Drugs and the Workplace", were well received in 1981-82.

Employee Assistance Program:

The Employee Assistance Program helps managers and employees to deal with work performance problems that may be caused by alcohol and other drug abuse. During 1981-82, this program continued to provide extensive consultation to employee/employer groups regarding development, implementation and maintenance for both public and private enterprise across the province.

Staff Training and Development:

Training and development seminars entitled "Pharmacology — A One-Day Seminar" and "Prevention — A One-Day Seminar" were offered several times to staff and allied agency personnel during 1981-82. In addition, long-term plans were outlined for staff training and development programs and an Orientation Kit and Reference Manual for staff were designed.

Provincial Liaison:

Liaison with the ad hoc committee for Safe Graduation resulted in a number of successful programs being carried out throughout the province. These programs, in turn, led to an increased demand for resource materials.

Education Division Statistics, 1980-81 and 1981-82

	1980-81	1981-82
Print and AV Distribution:		
Pamphlets	118,565	207,434
Folders	825	1,368
Posters	733	1,532
Films and Video Tapes	1,082	928
Manuals	193	201
Public Relations:		
Written Releases	20	9
Speaking Engagements	42	46
Displays	16	30
Training:		
Seminars	65	61

Rehabilitation Division

The goal of the Rehabilitation Division is to conduct, co-ordinate and promote programs for treating and rehabilitating and to provide services to those abusing or dependent upon alcohol and/or other drugs. It includes provision of rehabilitative, educational and support services to collaterals such as spouses and children. The division also provides learning experiences for students and staff of agencies working in the chemical dependencies field.

Assessment and planning provide the prerequisites for a treatment and rehabilitation process which is tailored to the specific needs of the individual. Such a process builds on the assets of the clients and their support systems, fosters psychological growth and development and promotes the successful integration of the individual into his or her own community environment.

The service spectrum of the divison represents a continuum ranging from the most protective in-patient program to the most independent out-patient arrangement utilizing multi-disciplinary, multi-modal approaches. Optimal involvement of community programs and support systems is encouraged. This includes co-ordination of the Commission's own resources, provision of learning experiences for students and other agency personnel and the establishment of functional linkages which favour the recovery process.

Facilities Operated by the Commission during 1981-82:

Regina Rehabilitation Centre,
2140 Hamilton Street, Regina:

- provides day-patient and out-patient programs
- during treatment, male patients reside in Myers House or the YMCA and female patients reside at the YWCA
- supervises methadone program; methadone is dispensed at the Regina General Hospital

Calder Centre,
230 Avenue R South, Saskatoon:

- provides day-patient and in-patient programs
- provides out-patient and in-patient programs for youth
- has an in-patient capacity for 30 patients and 10 spouses

Calder Out-Patient Clinic,
320 Fifth Avenue North, Saskatoon:

- provides group and counselling support services on an out-patient basis

The following statistics demonstrate strong activity by the Rehabilitation Division in areas such as rehabilitation, liaison with funded agencies and education services:

Rehabilitation Caseload:
Saskatchewan Alcoholism Commission
Comparative Statistics*
1980-81 and 1981-82

	Addicted	
	1980-81	1981-82
All Clients	1,822	1,928
Patient Days	15,364	16,999
	Non-Addicted	
	1980-81	1981-82
All Clients	782	611
Patient Days	4,757	3,559
	Total	
	1980-81	1981-82
All Clients	2,604	2,539
Patient Days	20,121	20,558

Other programs of an educational nature which the Rehabilitation Division conducts include the following:

	Participants 1980-81	1981-82
Youth program	47	55
Live-in youth program	109	75
Training programs and practicums:		
Regina	50	44
Saskatoon — training	271	158
practicums	169	174

* Comprehensive Rehabilitation Division statistics are on page 12.

Research Division

The Research Division is responsible for promoting, initiating and conducting research on alcohol and other drug-related disabilities. Research is aimed at evaluating and improving the delivery of services offered by the Commission. The division conducts baseline research which is essential in determining needs for programs and in the actual planning and development of programs. Baseline research is also undertaken to enhance our knowledge about the nature and magnitude of alcohol and other drug use, abuse and dependency throughout Saskatchewan.

Evaluation

The Division is presently involved in a process evaluation of the Commission's rehabilitation programs and is planning to expand this to include an outcome study of the program's effectiveness. The division is also conducting a six month follow-up study of the St. Louis Impaired Driver Treatment Program.

Research:

During the fall of 1981, a Research Division study entitled **Central Nervous System Prescription Drugs and Elderly People: an Overview of Issues and a Saskatchewan Profile** was released. The study identifies the nature and magnitude of CNS drugs utilization by elderly people in addition to providing a socio-demographic profile of the user population. This research is intended to provide an information base so that appropriate action can be taken to minimize the risks of drug utilization by this age group.

The Research Division is finalizing an alcohol and workplace study. This study examines the relationship among alcohol use, workplace stress and injury based on data obtained from Workers' Compensation Board files.

An alcoholic diagnostic study of people treated for alcoholism in the provincial health care system is also in progress. In addition to studying demographic and health information, this study also examines trends and interrelationships among various health care services for alcoholism.

Statistics and Information Monitoring:

The Research Division collects and monitors relevant statistics and other material on an ongoing basis. The services of the Commission and those of the Impaired Driver Treatment Program are monitored through a computerized information system and reports on client flow and profiles are prepared.

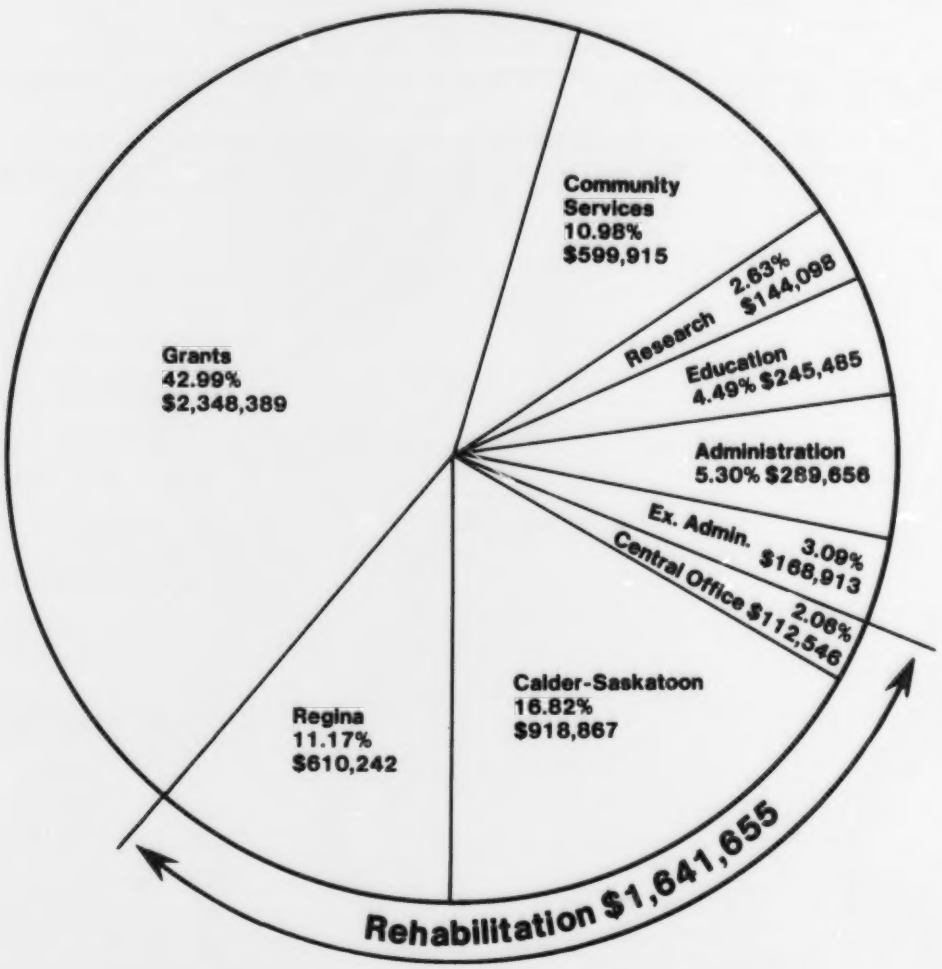
Library Services:

The division is also responsible for the Commission's library which has a comprehensive selection of materials in the addictions field available for use by Commission staff and the general public.

Rehabilitation Caseload, Saskatchewan Alcoholism Commission and Allied Agencies, 1981-82 Fiscal Year

	Alcoholism Commission			Allied Agencies			All Facilities		
	Addicted	Non-Addicted	Total	Addicted	Non-Addicted	Total	Addicted	Non-Addicted	Total
In-Patient:									
Male	391	50	441	3,544	—	3,544	3,935	50	3,985
Female	166	190	356	1,056	—	1,056	1,222	190	1,412
Total (1981-82)	557	240	797	4,600	—	4,600	5,157	240	5,397
Patient Days (1981-82)	10,251	1,883	12,134	51,801	—	51,801	62,052	1,883	63,935
Total (1980-81)	418	241	659	4,430	—	4,430	4,848	241	5,089
Patient Days (1980-81)	8,314	2,608	10,922	51,959	—	51,959	60,273	2,608	62,881
Day-patient:									
Male	410	9	419	—	—	—	410	9	419
Female	129	149	278	—	—	—	129	149	278
Total (1981-82)	539	158	697	—	—	—	539	158	697
Patient Days (1981-82)	6,748	1,676	8,424	—	—	—	6,748	1,676	8,424
Total (1980-81)	542	196	738	—	—	—	542	196	738
Patient Days (1980-81)	7,050	2,149	9,199	—	—	—	7,050	2,149	9,199
Out-patient:									
Male	471	32	503	245	7	252	716	39	755
Female	361	181	542	164	51	215	525	232	757
Total (1981-82)	832	213	1,045	409	58	467	1,241	271	1,512
Total (1980-81)	862	345	1,207	474	42	516	1,336	387	1,723
All Clients:									
Male	1,272	91	1,363	3,789	7	3,796	5,061	98	5,159
Female	656	520	1,176	1,220	51	1,271	1,876	571	2,447
Total (1981-82)	1,928	611	2,539	5,009	58	5,067	6,937	669	7,606
Patient Days (1981-82)	16,999	3,559	20,558	51,801	—	51,801	68,800	3,559	72,359
Total (1980-81)	1,822	782	2,604	4,904	42	4,946	6,726	824	7,550
Patient Days (1980-81)	15,364	4,757	20,121	51,959	—	51,959	67,323	4,757	72,080

The Saskatchewan Alcoholism Commission Expenditure Chart for the Fiscal Year 1981-82

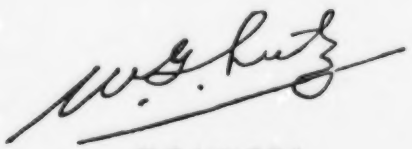


Auditor's Report

To the Members of the Legislative Assembly
Province of Saskatchewan

I have examined the balance sheet of the general fund and the contingency fund of The Alcoholism Commission of Saskatchewan as at March 31, 1982 and the statements of revenue, expenditure and fund balance and equity in fixed assets for the year then ended. My examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as I considered necessary in the circumstances.

In my opinion, these financial statements present fairly the financial position of The Alcoholism Commission of Saskatchewan as at March 31, 1982 and the results of its operations for the year then ended in accordance with generally accepted accounting principles applied on a basis consistent with that of the preceding year.



Regina, Saskatchewan
June 24, 1982.

W. G. Lutz, F.C.A.,
Provincial Auditor.

The Alcoholism Commission of Saskatchewan

General Fund
Balance Sheet

As at March 31

Assets

	1982	1981
Current Assets		
Cash	$ 283,990	$ 199,640
Short-term investments — at cost (which approximates market value)	74,016	100,000
Accounts receivable	5,300	10,739
Accountable advances	4,457	4,696
Total current assets	367,763	315,075
Fixed assets at cost (Statement 2) (Note 1)	428,169	376,525
	$ 795,932	$ 691,600

Liabilities and Equity

Current Liabilities		
Accounts payable	$ 290,456	$ 205,582
	290,456	205,582
Equity		
Equity in fixed assets (Statement 2) (Note 1)	428,169	376,525
Fund balance (Statement 3)	77,307	109,493
	505,476	486,018
	$ 795,932	$ 691,600

(See accompanying notes to the financial statements)

The Alcoholism Commission of Saskatchewan
General Fund

Statement of Equity in Fixed Assets

As at March 31

	Furniture & Equipment	Leasehold Improvements	1982 Total	1981 Total
Balance, beginning of year	$ 313,149	$ 63,376	$ 376,525	$ 352,965
Add: Purchases	48,909	2,735	51,644	29,981
	362,058	66,111	428,169	382,946
Deduct: Disposals	—	—	—	6,421
Balance, end of year	$ 362,058	$ 66,111	$ 428,169	$ 376,525

(See accompanying notes to the financial statements)

The Alcoholism Commission of Saskatchewan
General Fund

Statement of Revenue, Expenditure and Fund Balance

Year Ended March 31

	1982	1981
Revenue:		
Grant from Province of Saskatchewan	$5,307,327	$4,349,575
Other	98,598	104,885
	5,405,925	4,454,460
Collections on behalf of patient care	23,604	19,189
	5,429,529	4,473,649
Expenditures:		
Rehabilitation Division:		
Regina Rehabilitation Centre	610,242	600,031
Saskatoon Rehabilitation Centre	918,867	906,830
Central Office	112,546	111,265
	1,641,655	1,618,126
Community Services Division	599,915	522,566
Executive Administration Division	168,913	98,690
Administration Division	289,656	234,612
Education Division	245,485	265,881
Research Division	144,098	130,234
Total all divisions	3,089,722	2,870,109
Grants:		
Battlefords Out-patient Centre	30,000	–
Community Development	4,955	1,000
Crysler Residence	83,300	3,500
Danny Fisher Centre	30,700	25,231
Federation of Saskatchewan Indians	116,470	108,850
Gusway-Gerry Residence	192,000	–
Larson Intervention Centre	205,780	–
Lloydminster Intervention Centre	88,834	88,510
Melfort Out-patient Centre	30,000	–
Moose Jaw Intervention Centre	174,600	161,390
Native Alcohol Council	275,000	253,600
Native Alcohol Out-Patient and Crisis Centre	104,250	54,805
Native Alcohol Rehabilitation Centre	477,390	436,342
Prince Albert Alcoholism Council	94,400	87,270
St. Louis Rehabilitation Centre	406,710	379,123
Yorkton Out-patient Centre	34,000	28,802
Total grants	2,348,389	1,628,423
	5,438,111	4,498,532
Payments on behalf of patient care	23,604	19,189
	5,461,715	4,517,721
Deficiency of revenue over expenditure	32,186	44,072
Fund balance, beginning of year	109,493	153,565
Fund balance, end of year	$ 77,307	$ 109,493

(See accompanying notes to the financial statements)

The Alcoholism Commission of Saskatchewan
Contingency Fund

Balance Sheet

As at March 31

Assets

	1982	1981
Cash	$ 5,858	$ 4,326
Short-term investments — at cost (which approximates market value)	69,082	70,000
Accrued interest receivable	918	997
	$ 75,858	$ 75,323

Fund Balance

Fund balance (Statement 5) (Note 2)	$ 75,858	$ 75,323

See accompanying notes to the financial statements)

The Alcoholism Commission of Saskatchewan Contingency Fund

Statement of Revenue, Expenditure and Fund Balance

Year Ended March 31

	1982	1981
Revenue:		
Donations	$ 4,151	$ 5,398
Interest	12,134	10,713
	16,285	16,111
Expenditures:		
Special projects	15,750	10,987
Excess of revenue over expenditure	535	5,124
Fund balance, beginning of year	75,323	70,199
Fund balance, end of year (Note 2)	$ 75,858	$ 75,323

(See accompanying notes to the financial statements)

Notes to Financial Statements

March 31, 1982

1. Accounting Policies

   (a) Fixed Assets

   The Commission follows the policy of charging to current year's expenditure the full cost of all fixed assets purchased during the year. The Commission reports on its balance sheet the cost of all fixed assets owned with a corresponding figure reported as "Equity in Fixed Assets".

   (b) Occupancy Costs

   In accordance with government accounting policy, costs such as occupancy costs which are not normally allocated between government agencies are not charged to the Commission. As a result, there are no occupancy costs for the offices of the Executive Administration, Administration, Education and Research Division.

2. Contingency Fund

   The Contingency Fund is authorized under Section 9 of the Alcoholism Commission of Saskatchewan Act R.S.S. 1978. In accordance with the regulations, only revenue from private sources may be placed in the fund and expenditures may be made for special purposes such as research, travel, scholarships, bursaries, equipment and property. Although the regulations do not specify the accounting treatment of interest earned by the fund, the Commission has adopted the policy of including interest as revenue of the fund.